| AMENDMENT TRANSMITTAL LETTER Docket No. 0230-0242PUS1 | | | | | | | |
|--|---|---|-----------------------------------|----|------------------------|-------------------|------------------|
| Application No. 10/594,595-Conf. #5586 | | Filing Date September 28, 2006 | | • | Examiner S. L. Chen | | Art Unit 1632 |
| Applicant(s): Yukio KATO et al. | | | | | | | |
| - Alburganiday Tama i a st. an | | | | | | | |
| Invention: THERAPEUTIC AGENTS AND THERAPEUTIC METHODS FOR TREATING INJURED TISSUE | | | | | | | |
| MS AF Commissioner for I P.O. Box 1450 Alexandria, VA 223 | 313-1450 | | | | | | |
| Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below. | | | | | | | |
| CLAIMS AS AMENDED | | | | | | | |
| | Claims Remaining After Amendment | Highest Number Previously Paid | Number Extra Claims Present | | Rate | 1 1 12 12 12 13 1 | |
| Total Claims | 19 | - 23 = | 0 | Χ, | 26.00 | | 0.00 |
| Independent Claims | 3 | - 3 = | 0 | Х | 110.00 | | 0.00 |
| Multiple Dependent Claims (check if applicable) | | | | | | | |
| Other fee (please specify): | | | | | | | |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 0.00 | | | | | | | 0.00 |
| Large Entity x Small Entity | | | | | | | |
| x No additional fee is required for this amendment. | | | | | | | |
| Please charge Deposit Account No in the amount of \$ A duplicate copy of this sheet is enclosed. | | | | | | | |
| A check in the amount of \$ is enclosed. | | | | | | | |
| Payment by credit card. Form PTO-2038 is attached. | | | | | | | |
| The Director is hereby authorized to charge and credit Deposit Account No02-2448 as described below. A duplicate copy of this sheet is enclosed. | | | | | | | |
| x Credit any overpayment. | | | | | | | |
| x Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17. | | | | | | | |
| Gerald M. Murphy, Jr. Attorney Reg. No.: 28,977 | | | | | | July 9, | 2010 |
| BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road, Suite 100 East | | | | | | | |
| P. O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8000 | | | | | | | |
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